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THE SOUTHWESTERN

VOL. 76

Weatherford, Oklahoma 73096

Wednesday, November 6, 1985

No. 8

Answers To Students Questions About A.I.D.S.

The concern of AIDS has hit everyone on and off college campuses. SWOSU officials held a meeting Wednesday, Oct. 30, 1985, to discuss precautions that can be taken and ways to let the students of SWOSU be more aware of the virus and its effects. Southwestern is in the process of obtaining a seminar in November for students and anyone interested to learn more about the virus. Dr. Ronald Gilcher M.D. and director of the Sylvan Goldman Center of Oklahoma Blood Institutes will be the guest at the seminar. Dr. Gilcher will narrate, show slides, and the event will be

video taped for future use. The tentative date for the seminar is Tuesday, Nov. 19. Fred Janzen, Dean of Students, stated: "We want to alert students to what the AIDS virus is and to come up with a statement for a policy for CPR classes conducted on campus. Dr. Gilcher will be asked to write the policy."

THE DATE FOR THE SEMINAR IS NOT A DEFINITE DATE. "THE SOUTHWESTERN" WILL PUBLISH THE PLACE, TIME, AND DATE WHEN ALL THINGS ARE DEFINITE.

Requirements for Loans

Federal regulations require that a student be maintaining satisfactory academic progress in the course of study he or she is pursuing, according to the standards and practices of the institution in which he or she is enrolled, in order to receive aid under the Higher Education Act. These programs include the Pell Grant, National Direct Student Loan, College Work Study, Supplemental Education Opportunity Grant, State Student Incentive Grant, Guaranteed Student Loan, and Plus Programs.

The Oklahoma State Regents for Higher Education have revised the academic standards for new students. New students are defined as those students who enroll for the first time at Southwestern Oklahoma State University for the Fall 1985 Semester. Students admitted and enrolled for the Summer 85 Semester or before are on the "OLD" standards. All students will be on the "NEW" standards beginning the Fall Semester of 1988.

Both quantitative and qualitative standards for satisfactory academic progress shall be applied uniformly to all students whether or not the student has previously participated in Title IV programs.

A. QUALITATIVE REQUIREMENTS

In order to satisfy the qualitative requirements for satisfactory academic progress, all students, depending on his/her enrollment date, must satisfy the following minimum standards:

1 (a). OLD STANDARDS
Hours attempted 1-36 37-72
Minimum CGPA 1.5 1.6

Hours attempted 73-108
Minimum CGPA 1.8

Hours attempt. 109 & above
Minimum CGPA 2.0

1 (b). NEW STANDARDS
Hours attempted 1-36 37-72
Minimum CGPA 1.6 1.8

Hours attempt. 73 or above
Minimum CGPA 2.0

2. For financial aid purposes, grades of F, W, WF, I and U shall be considered hours attempted. However these are not considered hours

satisfactorily completed.

3. Any grades resulting in suspension from participation in the Title IV programs must be completed or changed, and that change recorded on the student's official academic transcript, before the beginning of the next semester in which the student enrolls in order to be eligible for financial assistance during that semester.

4. For students who are otherwise eligible, cumulative grade point average, (calculated by the University Registrar), and hours attempted, (calculated by the Financial Aid Officer), shall be used in determining initial and continuing eligibility to participate in Title IV programs.

5. All students will be evaluated at the end of each semester (summer semester included, if applicable) to determine if satisfactory academic progress is being maintained.

B. QUANTITATIVE REQUIREMENTS

In order to satisfy the quantitative requirements for satisfactory academic progress, all students must meet the following criteria:

1. All students must successfully complete at least 75 per cent of ALL hours attempted at the end of each semester (summer semester included, if applicable).

C. TRANSFER STUDENTS

1. Any student transferring to Southwestern Oklahoma State University, that is otherwise eligible, may receive Title IV Aid for the first semester of enrollment regardless of past quantitative or qualitative achievement.

2. At the end of the first semester of enrollment, all minimum requirements as described in A and B above must have been met for continued eligibility.

D. CONTINUING STUDENTS

1. Any student enrolled at SWOSU prior to the ef-

(Continued on page 2)

Facts about AIDS

The Acquired Immune Deficiency Syndrome, or AIDS, was first reported in the United States in mid-1981. Since that time, the Public Health Service has received reports of more than 12,000 cases, about 50 per cent of which have resulted in death.

AIDS is a serious illness, and a public health problem that merits concern. It has been named the number-one priority of the U.S. Public Health Service. Researchers in the Public Health Service and in many major medical institutions have been working for more than four years to study AIDS, identify its cause, and develop treatments and preventive measures.

This fact sheet describes, in question-and-answer form, accurate information about the nature and extent of AIDS, the risk of contracting AIDS, the actions individuals can take to reduce spreading AIDS, and current research and related activities under way in the Public Health Service.

What is AIDS?

AIDS is a serious condition characterized by a defect in natural immunity against disease. People who have AIDS are vulnerable to serious illnesses which would not be a threat to anyone whose immune system was functioning normally. These illnesses are referred to as "opportunistic" infections or diseases.

What causes AIDS?

Investigators have discovered the virus that causes AIDS. Different groups of investigators have given different names to the virus, but they all appear to be the same virus. The virus is called human T-lymphotropic virus, type III (HTLV-III); lymphadenopathy associated virus (LAV); or AIDS related virus (ARV). Infection with this virus does not always lead to AIDS. Preliminary results of studies show that most infected persons remain in good health; others may develop illness varying in severity from mild to extremely serious.

What are its symptoms?

Most individuals infected with the AIDS virus have no symptoms and feel well. Some develop symptoms which may include tiredness, fever, loss of appetite and weight, diarrhea, night sweats, and swollen glands (lymph nodes)—usually in the neck, armpits, or groin. Anyone with these symptoms which continue for more than two weeks should see a doctor.

Who gets AIDS?

Ninety-four per cent of the AIDS cases have occurred in the following groups of people:

- Sexually active homosexual and bisexual men with multiple partners, 73 per cent;
- Present or past abusers or intravenous drugs, 17 per cent;*
- Persons with hemophilia or other coagulation disorders, one per cent;
- Heterosexual contacts of someone with AIDS or at risk for AIDS, one per cent;
- Persons who have had transfusions with blood or blood products, two per cent.

Some six per cent of patients do not fall into any of these groups, but researchers believe that transmission occurred in similar ways. Infants and children who have developed AIDS may have been exposed to HTLV-III before or during birth, or shortly thereafter, or may have a history of transfusions. Some patients died before complete histories could be taken. Special studies of risk factors are under way with each of these groups considered to be at increased risk for getting AIDS.

*In addition, a certain number of homosexual or bisexual men are also IV drug abusers.

What is the geographic distribution of reported AIDS cases?

Thirty-six per cent of the cases in the U.S. are reported from New York State and about 23 per cent from California. AIDS cases have been reported from 46 states, the District of Columbia, Puerto Rico, and more than 35 other countries.

How contagious is AIDS?

Casual contact with AIDS patients or persons who might be at risk for the illness does not place others at risk for getting the illness. No cases have been found where AIDS has been transmitted by casual household contact with AIDS patients or persons at higher risk for getting the illness. Although the AIDS virus has been found in saliva and tears, there have been no cases in which exposure to either was shown to result in transmission. Ambulance drivers, police, and firefighters who have assisted AIDS patients have not become ill. Nurses, doctors, and health care personnel have not developed AIDS from caring for AIDS patients. However, health care and laboratory workers should follow safety procedures carefully when handling any blood and tissue samples from patients with potentially transmissible diseases, including AIDS.

How is AIDS transmitted?

AIDS is spread by sexual contact, needle sharing, or less commonly, through blood or its components. The risk of getting AIDS is increased by having multiple sexual partners, either homosexual or heterosexual, and sharing of needles among those using illicit drugs. The occurrence of the syndrome in hemophilia patients and persons receiving transfusions provides evidence for transmission through blood. It may be transmitted from infected mother to infant before, during, or shortly after birth.

How long after exposure to HTLV-III does a person develop AIDS?

The time between infection with the HTLV-III virus and the onset of symptoms (the incubation period) seems to range from about six months to five years and possibly longer. Not everyone exposed to the virus develops AIDS.

How is AIDS diagnosed?

There are no clear-cut symptoms that indicate the loss of immunity. The diagnosis of AIDS depends on the presence of opportunistic diseases. Certain tests which demonstrate damage to various parts of the immune system, such as specific types of white blood cells, support the diagnosis. The presence of opportunistic diseases plus a positive test for antibodies to HTLV-III can also make possible a diagnosis of AIDS.

Is there a laboratory test for AIDS?

As with most other infections, there is no single test for diagnosing AIDS. There is now a test for antibodies (substances produced in the blood to fight disease organisms) to the virus that causes AIDS. Presence of HTLV-III antibodies means that a person has been infected with the AIDS virus; it does not tell whether the person is still infected. The antibody test is used to screen donated blood and plasma and assist in preventing cases of AIDS resulting from blood transfusions or use of blood products, such as Factor VIII, needed by men with hemophilia. The test is also available through private physicians, most state or local health departments and at other sites.

What are some of the diseases affecting AIDS patients?

About 85 per cent of the AIDS patients studied have had one or both of two rare diseases: Pneumocystis carinii pneumonia (PCP), a parasitic infection of the lungs; and a type of cancer known as Kaposi's sarcoma (KS). KS usually occurs anywhere on the surface of the skin or in the mouth. In early stages, it may look like a bruise or blue-violet or brownish spot. The spot or spots persist, and may grow larger. KS may spread to, or appear in, other organs of the body. PCP has symptoms similar to any other form of severe pneumonia, especially cough, fever, and difficulty in breathing. Other opportunistic infections include unusually severe infections with yeast, cytomegalovirus, herpesvirus, and parasites such as Toxoplasma or Cryptosporidia. Milder infections with these organisms do not suggest immune deficiency.

Is there a danger of contracting AIDS from donating blood?

No. Blood banks and other blood collection centers use sterile equipment and disposable needles. The need for blood is always acute, and people who are not at increased risk for getting AIDS are urged to continue to donate blood as they have in the past.

How is AIDS treated?

Currently there are no antiviral drugs available anywhere that have been proven to cure AIDS, although the search for such a drug is being pursued vigorously. Some drugs have been found that inhibit the AIDS virus, but these do not lead to clinical improvement. Though no treatment has yet been successful in restoring the immune system of an AIDS patient, doctors have had some success in using drugs, radiation, and surgery to treat the various illnesses of AIDS patients. Therapeutic agents are needed for all stages of AIDS infections, to block action of the virus once infection has occurred, and to build up immunity in patients who have developed AIDS symptoms. Eventually, a combination chemotherapy to combat the virus and restore the immune system may be the most effective therapy.

(Continued on page 2)

(AIDS...continued from page 1)

(Pneumocystis carinii pneumonia, for example can be treated with antibiotics. Interferon, a virus-fighting protein produced naturally by the body, has been used with some success against Kaposi's sarcoma. Natural and recombinant interleukin preparations are being used in an attempt to repair the immunologic deficiencies in AIDS patients.)

Can AIDS be prevented?

Yes. Cases of AIDS related to medical use of blood or blood products are being prevented by use of HTLV-III antibody screening tests at blood donor sites and by members of high risk groups voluntarily not donating blood. Heat treatment of Factor VIII and other blood products helps prevent AIDS in patients with hemophilia and other clotting disorders. There is no vaccine for AIDS itself. However, there is good reasons to believe that individuals can reduce their risk of contracting AIDS by following existing recommendations. Communities can help prevent AIDS by vigorous efforts to educate and inform their populations about the illness, with special emphasis on educational activities for members of high risk groups. Meanwhile, the discovery of the AIDS virus and methods developed for producing large quantities of the virus for experimental and other purposes enables scientists to work at developing a vaccine. The Public Health Service recommends that the following steps be taken to prevent spread of AIDS:

- Do not have sexual contact with persons known or suspected of having AIDS.
- Do not have sex with multiple partners, or with persons who have had multiple partners.
- Persons who are at increased risk for having AIDS should not donate blood.
- Physicians should order blood transfusions for patients only when medically necessary. Health workers should use extreme care when handling or disposing of hypodermic needles.
- Don't abuse IV drugs. If you use IV drugs, then don't share needles or syringes (boiling does not guarantee sterility).
- Don't have sex with people who abuse IV drugs.
- Don't use inhalent nitrites (poppers). Their role as a cofactor for KS is being investigated.

Special recommendations for persons with positive HTLV-III antibody tests have been made to further prevent the spread of AIDS.

- A regular medical evaluation and follow-up is advised for persons with positive tests.
- Persons with positive blood tests may pass the disease on to others and should not donate blood, plasma, body organs, other tissue, or sperm. They should take precautions against exchanging body fluids during sexual activity.
- There is a risk of infecting others by sexual intercourse, sharing of needles, and possibly, exposure of others to saliva through oral-genital contact or intimate kissing. The effectiveness of condoms in preventing infection with HTLV-III is not proved, but their consistent use may reduce transmission, since exchange of body fluids is known to increase risk.
- Toothbrushes, razors, or other implements that could become contaminated with blood should not be shared.
- Women whose sexual partner is antibody-positive are themselves at increased risk of acquiring AIDS. If they become pregnant, their children are also at increased risk of acquiring AIDS.

Revised recommendations will be published as additional information becomes available. Further information about AIDS may be obtained from your local or state health department or your physician. The Public Health Service AIDS hotline number is 1-800-447-AIDS. Atlanta area callers should dial (404) 329-1295.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES•Public Health Service

Chemistry Job; Openings

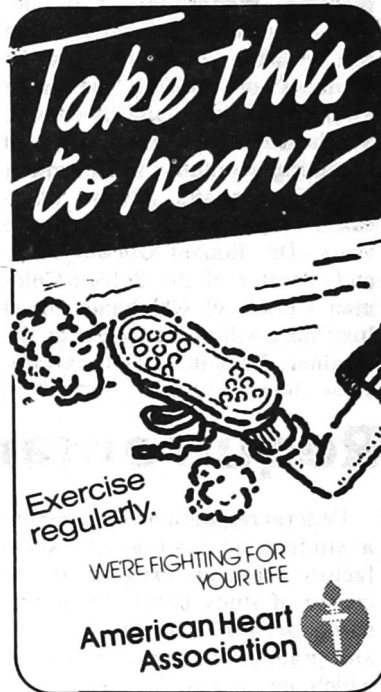
There will be openings for jobs in the chemistry stockroom in the spring semester. The hours that will be open are: Monday-Thursday at 1 p.m.-5 p.m. and Tuesday-Thursday from 8 a.m.-11 a.m.

There are a few requirements for applicants. Those applying should have completed General Chemistry I by the spring semester, be able to work at least two of the shifts listed, and be reliable and be able to work steadily. Those who can work two or three hours in the morning or start at 2 p.m. will be considered for the job.

The stockroom will not be open when classes are not in session.

The positions need to be filled by Dec. 1, 1985.

Thanksgiving Break is Nov. 26 at 10 p.m. and ends Dec. 1. The SWOSU schedule had a misprint on Thanksgiving Break.



Letters . . .

STUDENTS OF SOUTHWESTERN:

Thank you for your encouragement and support during the Homecoming Queen contest. I am so flattered to have been chosen, especially after becoming acquainted with the other contestants. And I appreciate all the other recognition you've given me since the coronation. I've received so much attention that I'm truly beginning to feel like royalty!

Thanks again,
SUSAN TENNERY

New Federal Laws for Student Loan Requirements

(Continued from page 1)

fective date of this revised satisfactory academic progress policy, who may be adversely affected by this policy, may be eligible for Title IV aid for the next semester of enrollment.

2. At the end of the next semester of enrollment, all minimum requirements as described in A and B above must have been met for continued eligibility.

E. FINANCIAL AID SUSPENSION

1. In the event that a student fails to meet the above criteria, the student shall be suspended from participating in all Title IV programs until such time as his/her eligibility has been re-established by meeting all minimum standards for satisfactory academic progress.

F. APPEAL OF FINANCIAL AID SUSPENSION

1. In the event a student is suspended from participation, he/she may appeal, in writing, to the Chairman of the Appeals Committee, Dr. Fred Janzen, Dean of Student Personnel, explaining in detail any extenuating circumstances under which minimum requirements were not met. (Extenuating circumstances include, but are not limited to: illness, death in the family, hospitalization, etc.). The student also has the right to appear in his/her behalf at which time any supporting evidence may be presented. The student will be notified, in writing, of the Committee's decision.

G. LIMITATION OF STUDENT ELIGIBILITY (maximum time frame)

1. All students enrolled in a 4-year degree or certificate program, requiring a minimum of 124 hours

for completion, may attempt 165 hours in pursuit of the degree or certificate.

2. All students enrolled in a 5-year degree program (pharmacy, etc.), requiring a minimum of 164 hours for completion, may attempt 225 hours in pursuit of his/her degree.
3. Students changing majors from a 4-year program to a 5-year program may attempt 225

hours in their pursuit.

4. Only those students accepted to and enrolled in a 5-year program (specifically pharmacy) will be treated as 5-year students for financial aid purposes.
5. Therefore any student who withdraws or is suspended from a 5-year program will automatically, during the length of his/her withdrawal or suspension, be subject to standards of satisfactory academic progress the same as that of those in a 4-year program.

6. If degree requirements are not met in the maximum time frame, as described above, the student will no longer be eligible for Title IV aid, since satisfactory academic progress will not have been maintained.

Two men look out through the same bars; one sees the mud, and one the stars. Langbridge.

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Casebeer Enjoys Band And Exposure Also

By GAY STEPHENS

Kevin Casebeer, lead guitarist for the rock band "Xcelerator," is a very busy guy. Carrying 12 hours, practicing four times a week, and usually performing once a week is a tough schedule to keep up with but Kevin doesn't feel it is too hard as long as he keeps his priorities straight. "First comes the band, and then school."

Kevin started playing the bass guitar when he was in seventh grade and then moved on to lead guitar five years ago. He played in several different bands for a few

years, then, about three months ago, he and four other guys got together and formed "Xcelerator." Even though the band is the most important part of his life, Kevin is planning on finishing college so he can get a good job to buy equipment. He hopes someday to have a career as a musician.

"Xcelerator" consists of five members: Rodney Frizzel, Oklahoma City, is the drummer; Steve Robertson, of El Reno, plays rhythm guitar, and Mickey Crawford, also of El Reno, plays bass guitar. Rick Byerly, the lead

singer, lives in Weatherford and attends Southwestern, as does Kevin Casebeer, the lead guitarist.

The band is performing about once a week, usually on week-ends, with the farthest gigs being about two and a half hours away. They played at the State Fair, which was mainly a publicity concert that helped the band a lot. Their biggest crowd ever was at the "Weatherford Jam," sponsored by Rick Byerly, at the beginning of this semester.

Kevin loves being recognized

as a rock star and likes almost everything about the band. The only drawback is, sometimes the band is pressured to play songs they don't really like--some popular dance tunes. But as long as it will benefit the band, they will do it.

"Xcelerator's" image is heavy metal, and while the members don't dress exactly alike they all carry out the same theme, varying from leather, chains, and very bright colors, to referee's clothes. "Nothing is like the feeling of being on stage," said Kevin. He

wishes he could feel like that all of the time. "Sometimes everyday life can get you down, but up there, performing, nothing does."

Kevin estimated the bands total cost of equipment at \$10,000. Not meaning to discourage any young hopefuls, he has a few words of advice: "Never get down on yourself, and never doubt what you can do. To make it big you have to make it your life. There is a lot of pressure and you may feel you have to do certain things you don't want to do, but do them."

Bloomquist Discovers 'Snaky Way' To Have Fun

By BRAD SHAW

Rumor has it that rattlesnake meat tastes like chicken, right? Well, according to Steve Bloomquist, veteran snake hunter and junior studying pharmacy here at SWOSU, "It tastes a whole lot more like baked rubberbands with chicken flavoring."

Steve began hunting the deadly rattlesnake in the fall of '81 when he was an Eagle Scout. He and another scout were hiking in the Wichita Mountains when they found a rather large cave. Inside, the cave was seething with dozens of rattlers. "I had always been taught that snakes will make a person harm themselves more than they'll harm you, so we just played it cool," Steve commented. "We thought it was kind of

neat and went home and got some potato sacks, then went back and got ourselves a few and took them home." Steve has been hunting the rattler ever since and has caught about 300 of them.

Finding places to hunt them is hardly a problem for Steve, because where he mostly hunts is on farmer's pasture land. Farmers love for him to take the snakes which they find both a nuisance and a danger. "Usually the only stipulation they put on me is that I take all I can find," Steve says.

A six-foot-four-inch long Western Diamond Back Rattler is Steve's biggest snake to date, which he mounted on a trophy board and gave to a friend. "I learned to tan the skins by asking

around, and through trial and error, I've learned that soaking them in anti-freeze works well." Besides mounting the skins on boards, Steve has also made belts with some of his slimy friends. Mounting the skins and making belts with them are fine and good, but he mainly enjoys the challenge of catching them, turning them loose in his yard, and handling them.

For the past four years Steve has hunted the rattlesnake and eluded death time and time again. Only one rattler has gotten hold of Steve, and that was just by his coverall leg, the fangs barely scraping the skin. "It wasn't really serious at all," Steve stated nonchalantly. "Rattlesnake bites are seldom deadly, unless you get

bit in a vital spot, like a vein." Steve says he doesn't ever plan to really get bit but feels he will be able to keep his wits about him, put a tourniquet on it, and make it to a doctor safely in the event it ever does happen.

Rattlesnakes are not aggressive creatures and will do everything possible to escape from humans, so the advantage belongs to the hunter in this unseemly sport. Steve feels he will be safe from harm as long as he's careful and takes care of business.

Besides the excitement of hunt-

ing snakes, Steve enjoys building performance engines and flying. His father, an M.D., flies both an airplane and a helicopter. Steve, who has already had his ground school training, now only lacks his in-flight training to get his license.

"Mom told me it was hard for her to believe I was her son when I told her I was hunting rattlesnakes," Steve laughed. "As for this article, I don't care too much if anybody reads it. I've already got enough people thinking I'm crazy."

McGlamery's Pipes A New Thing

"Deep interest in my ethnic background (Scottish) lead me to discover the world of celtic music (songs from Scotland, Ireland, Wales, England and neighboring islands). The thrill I always experience when hearing the skirl of the pipes gave rise to the desire to play them myself," said Martin McGlamery.

"The bagpipes epitomize all that was and is Scotland. The martial or warlike sound is like unto the spirit of the people. The bagpipes represent a harsh yet splendid time of a by-gone age," he explained. "A great part of playing the bagpipes is to become a part of such an age."

The bagpipes, McGlamery said, are "thought to have originated as early as 2000 B.C." In those days "the instrument consisted of an animal's stomach connected to a double reeded chanter. The drones, which are

the constant sounding parts of the instrument, were not added until later in history. The present form of the bagpipes has been in existence since the 1700's."

"The bagpipes were played throughout the world at one time, but because of its appeal to the people in the highlands of Ireland and Scotland it is now played and associated with that area of the world."

"The bagpipes perform best in the environmental setting most like unto Scotland and Ireland. This means they 'sing' in the cold, wet mountains," he said. He warned that "they are temperamental instruments and in hot dry settings they will often not properly perform."

"Because of the novelty and uniqueness of the sound, they are received well in most settings. It is most enjoyable to play them from a high point where the sound

can be carried off on the wind, and one can view a setting which creates an illusion of being high in the mountains of Ireland and Scotland," he pointed out.

While McGlamery was living at the "great Atlantic Ocean" in South Florida, he met an Irish priest who played the pipes. "He introduced me to the basic piping techniques, and I began to practice in earnest while looking out upon the ocean," he said. He also became involved in Scottish games and other Celtic functions throughout Florida and the Southeast.

McGlamery has been asked to share the music of the pipes with several classes, churches, and a festival in Weatherford.

When not in school he plays every day, but due to the "obvious hectic schedule of school" he usually gets in two or three sessions a week.

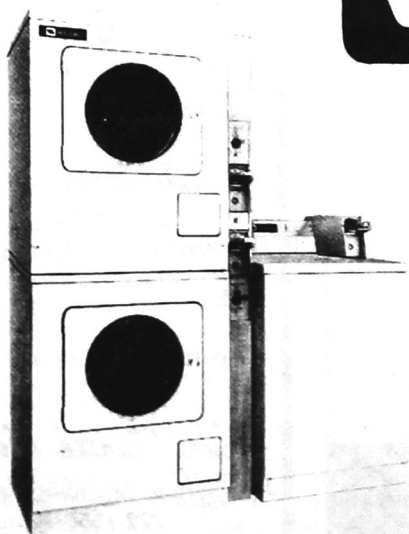
This is a formal apology to the Music Department for the misinformation in the Homecoming edition. We would also like to apologize to Dr. Richard O'Briant for the incorrect first name given him in the story. We regret the error.

222 E. MAIN



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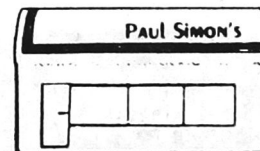
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Dedicated Student Commutes from Enid Daily

By JERI GARRETT
Most students' daily routine includes dragging out of bed after a long night of "extracurricular" activities, showering, pulling on clothes, forcing down some unmentionable item, like pizza, for breakfast and rushing across campus, or maybe even down the street, for an "early" 11:00 a.m. class. But for Marty Hoffman, Southwestern freshman, daily routine means driving 200 miles, round trip, from Enid, to make his 8:00 a.m. class period on time.

Marty joined the Air Force in 1976 and was stationed at Altus, Oklahoma. "My wife, Shila, and I got married in 1978 and then when my term of duty at Altus was over, we moved to Enid, to Vance Air Force Base, where I got a job with Northrop, working on planes," said Hoffman.

One reason Marty chose Southwestern over a school nearer Enid was because of tuition costs. "If I had gone to school in Enid, it would have cost about \$127 an hour compared to SWOSU's approximate \$18 an hour."

The most important reason for the choice of school was that Marty's wife, Shila, has been attending Pharmacy School here at Southwestern for the past two years. "I wanted to be closer to my wife so going to school at SWOSU was really the only choice I would have made in deciding which school to attend. When Shila was choosing schools, Oklahoma University or Southwestern were her two choices, and after going to this school she knew she

had made the best choice of the two because of the smaller, more friendly atmosphere, and I definitely agree with that."

Twenty-six year old Hoffman and his wife are going to school with the aid of the G.I. Bill, which gives them a monthly allotment for their educational needs. "It takes about \$120 a month to drive back and forth from Enid to Weatherford, so I'm glad to have the allotment to take care of it," said Marty.

Asked how many times Marty has been late for his 8:00 a.m. class he commented smiling, "I've never been late, yet. It takes about two hours one way, if you do fifty-five, but that is sometimes shortened if I get in a hurry."

Marty is majoring in computer science and one day hopes to work for NASA. He wants to work on space shuttles that will take the ordinary citizen into outer space. "I want to be one of those people

who look down on the earth from up in the heavens, not just seeing it in someone else's pictures."

Hoffman anticipates the day when the extra dedication he has put forth pays off, but says, "Right now, getting all this hard work over with is most important. We own our home in Enid, and even though Weatherford is a great little town, we will probably stay in Enid, and keep driving that long drive, until my wife and I can finish our educations."



SWOSU SHOW CHOIR members include (front): Jennifer Lamarr; (row two, l-r): Kelly Gage and Darlys Larson; (row three, l-r): Steve West, Randy Sprague, Don High, John Reynolds, Johnny Scott, and Joey Martin; (top, l-r): Paula Summers, Diane Sutherland, and Cheryl LaGuire.

CAFETERIA MENU

November 6-12, 1985

	Lunch	Dinner
Wed.	Corn Dogs Turkey Noodle Casserole	Breaded Pork Chops Swiss Steak
Thur.	Hamburgers Campfire Hash	Roast Beef Ham/Noodle Casserole
Fri.	Stuffed Franks Beef Enchiladas	Chicken Fried Steak Ravioli
Sat.	Chef's Choice Sloppy Joe Sandwiches	B.L.T. Sandwiches Chef's Choice
Sun.	Turkey & Dressing Veal Parmesan	Ham Yammies Beef/Noodle Casserole
Mon.	Corn Dogs Turkey & Noodles	Hamburger Steak/Onions Pork Tips
Tues.	B.L.T. Sandwiches Texas Hash	Beef Tips/Green Pepper Polish Sausage/Kraut

November 13-19, 1985

Wed.	Pizza Zippy Beef Casserole	B.B.Q. Chicken Shrimp Creole
Thur.	Tuna Salad Sandwiches Burrito/Chili/Cheese	Ham Steaks Smothered Steak
Fri.	Roast Beef Sandwiches Ravioli	Cheeseburgers Tuna Noodle Casserole
Sat.	Submarine Sandwiches Chef's Choice	Tacos Chef's Choice
Sun.	Chicken Breast Surprise Roast Beef/Gravy	Chili Dogs/Cheese Chef's Choice
Mon.	Grilled Cheese Sandwiches Hamburger/Macaroni Cass.	Breaded Pork Chops Steak Fingers
Tues.	Hamburgers Apple Fritters/Sausage	Braised Beef Tips Ham Steaks

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'Dawgs Win Third Straight; Capture a Share of OIC

By PAUL LANCASTER

Rick Gross intercepted a pass for a touchdown, and Lonnie May scored two touchdowns as the Southwestern Bulldogs defeated the Northeastern Redmen 20-17 last Saturday.

The 'Dawgs started out with the ball and moved only seven yards before Deven Cross punted to the NE 44. On the first Redmen play, Randy Webster recovered the fumbled pitch by Knox.

Again the 'Dawgs moved a minimal pace and on fourth-and-twenty-five Cross punted to the NE 8. Northeastern moved for three plays before being stopped by Rick Gross' interception return for a touchdown. With Rezaie's point after, the 'Dawgs led 7-0 with 8:50 remaining in the first quarter.

In thirteen plays the Redmen moved in both directions. Defensive sacks by Randy Webster and Marvin Preston caused a punting situation that gave the Bulldogs the ball on their own 22. Another five plays resulted in Cross' third punt of the quarter to the NE 41.

On first-and-ten Phil Goodman exploded and ran 59 yards for a touchdown and with the point after, the game was tied at 7-7 with :18 seconds remaining in the first quarter.

The 'Dawgs ran ten plays on their next drive moving the ball 40 yards before Cross booted a 46 yard punt into the endzone. The Redmen moved 28 yards in six plays on their drive before Willie Pennon recovered a missed hand-off on the SW 46.

On a 12 play 54 yard drive, the 'Dawgs moved down the field with a mixture of passing and running capped off by Lonnie May's two-yard dive with 5:03 remaining in the half. With Rezaie's PAT the 'Dawgs led 14-7.

The Redmen started with the ball in the second half. They mov-

ed the ball 57 yards in 13 plays, but during the drive Randy Webster and Marty Irland sacked the quarterback or stopped Goodman for a loss. The crutch of the drive was when the Redmen punted and recovered a Bulldog fumble. On a fourth down play from the 23, Nasworth booted a forty-yard fieldgoal with 8:37 remaining in the third quarter to narrow the margin to 14-10.

Northeastern again moved the ball unsuccessfully and on a fourth-and-twelve play, Randy Webster blocked the punt.

The 'Dawgs took over on the 39 and marched down the field once again with a ten yard run by Lonnie May resulting in the 'Dawgs final touchdown. Rezaie's point after failed and the 'Dawgs led 20-10 with 1:42 remaining in the third quarter.

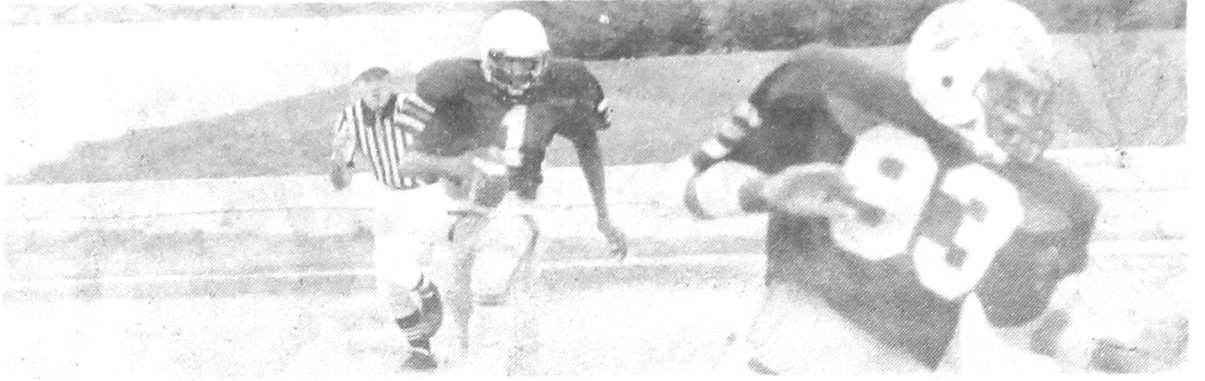
The next drive the Redmen were stopped dead in their tracks as a result of a sack by Irland and a stop by Darrell Manigo. The 'Dawgs gave it right back on an interception by Marion Brown.

The Redmen moved the ball in four plays as Knox ran 34 yards for a TD. With the point after, the Redmen drew closer at 20-17 with 12:18 remaining in the game.

Each team had two more possessions and the time ran out with the Bulldogs winning their third straight 20-17.

The offense had 218 yards on the ground, of which Lonnie May had 128 yards and two TD's. Marion Brown passed 15 times completing seven for 56 yards and one interception. Marty Irland led in tackles with nine, followed by Randy Webster with eight.

The 'Dawgs have now clinched at least a tie for the conference title. They have two games remaining, Langston here on Saturday and Northwestern at Alva a week from Saturday.



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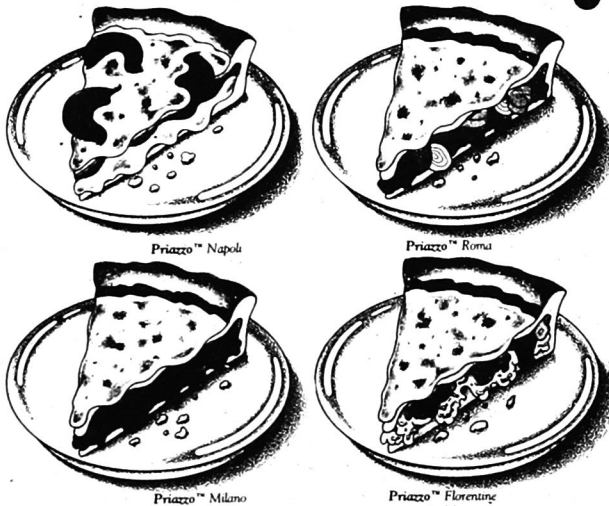
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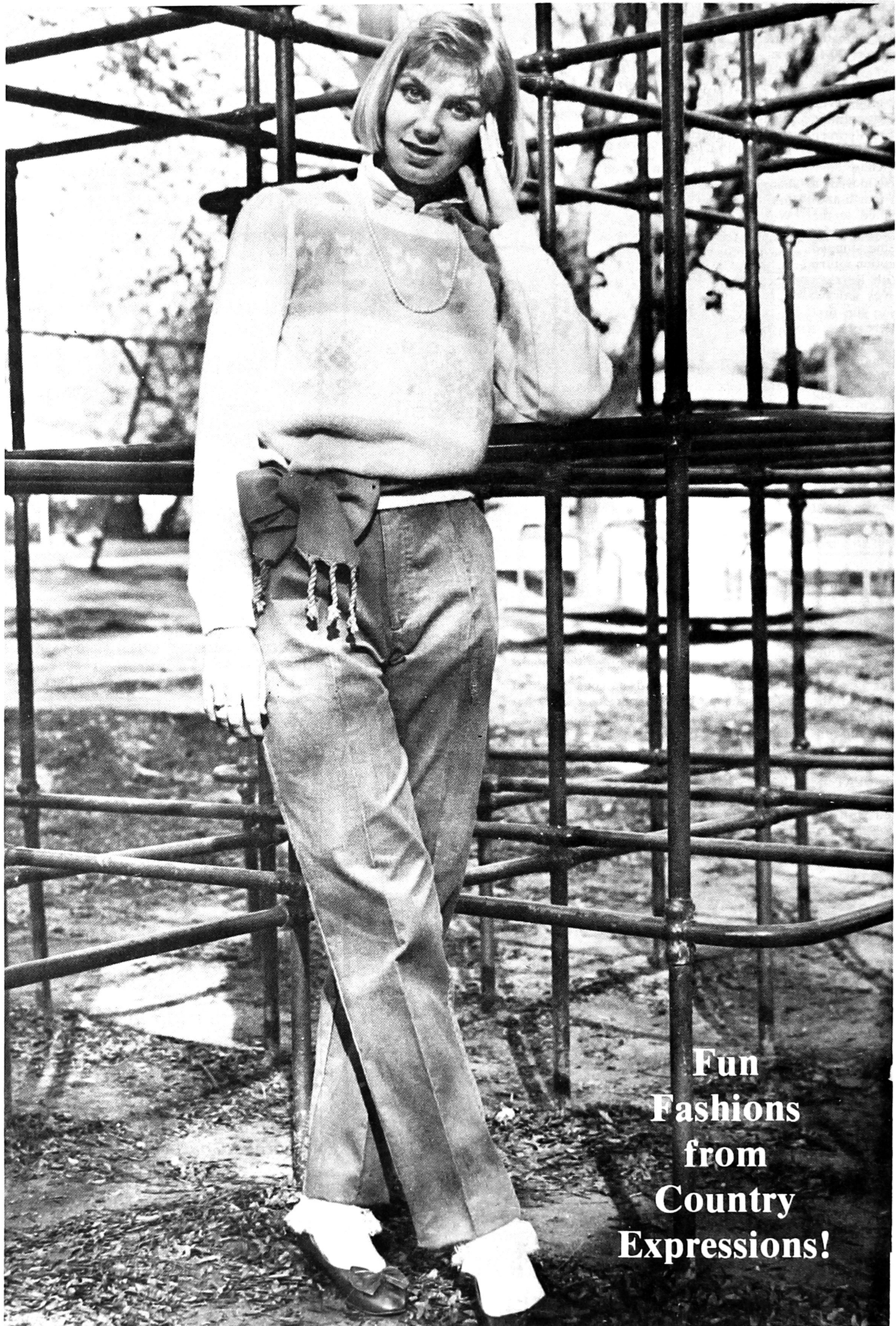
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